

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN  
SOUTHERN DIVISION

JACK REESE, JAMES CICHANOFSKY,  
ROGER MILLER, and GEORGE NOWLIN  
on behalf of themselves and  
a similarly situated class,

Hon. Patrick J. Duggan

Case No. 04-70592

Plaintiffs,  
v.

**Class Action**

CNH INDUSTRIAL N.V. and  
CNH INDUSTRIAL AMERICA, LLC,

Defendants.

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**EXHIBIT A**

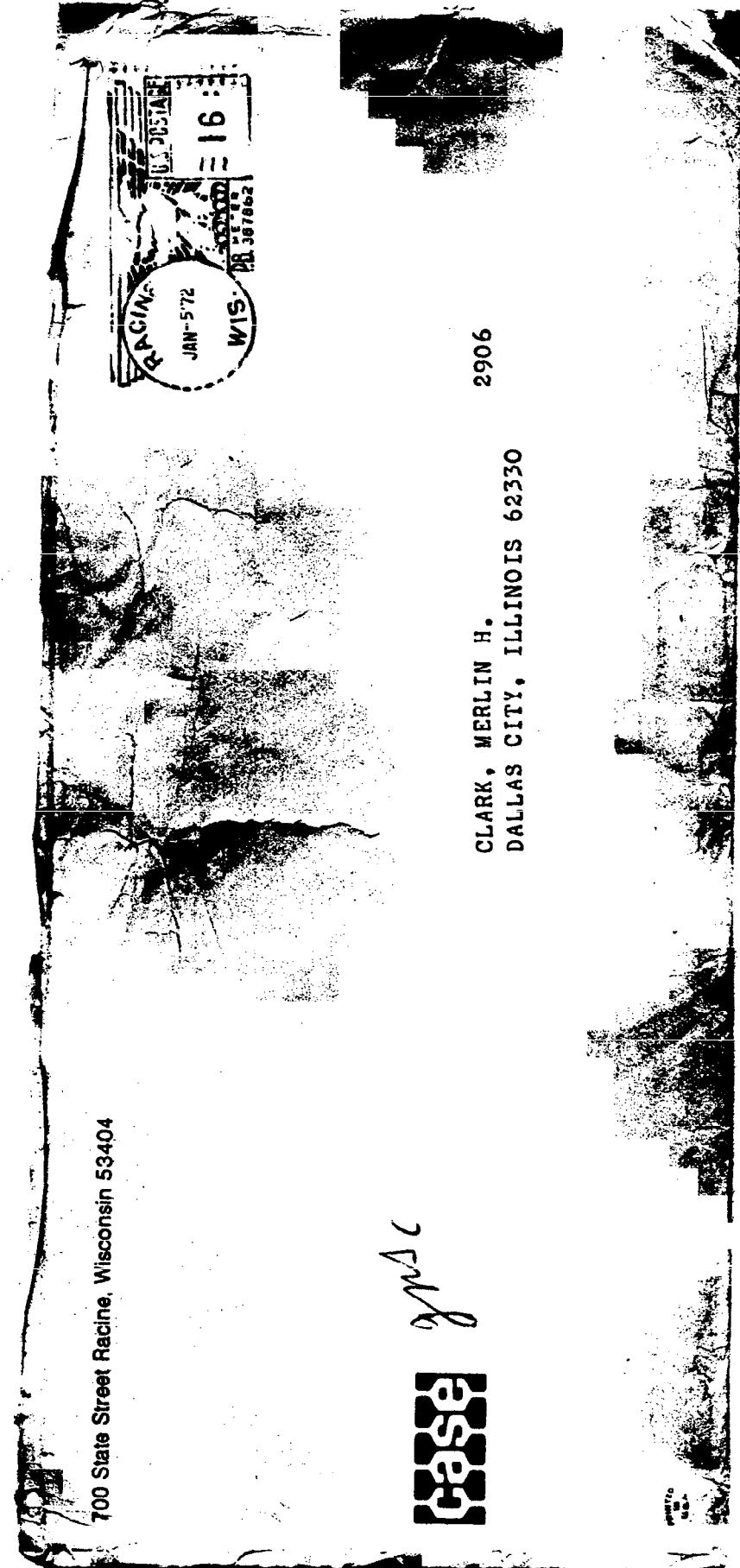
**to**

**PLAINTIFFS' MOTION FOR RECONSIDERATION**

**Letter Clement J. Devine to Retirees of the J I Case Company Retired  
Under The Hourly Employee Pension Plan**

**with envelope addressed to Merlin H. Clark**

**December 30, 1971**



700 State Street Racine, Wisconsin 53404



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CLARK, MERLIN H.  
DALLAS CITY, ILLINOIS 62330

base  
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CM10516

Corporate Offices

December 30, 1971



TO: RETIREES OF J I CASE COMPANY,  
RETired UNDER THE HOURLY EMPLOYEE PENSION PLAN

Here are the details of the Group Medical Insurance you are eligible for January 1, 1972, as a J I Case Retiree or the Surviving Spouse of a Retiree.

We have put the information in a question-and-answer format believing this to be most understandable and anticipating the questions most of you have in mind. Because this letter contains considerable important information, please read it carefully and keep it for future reference.

1. WHAT DOES THE PLAN COVER?

The medical expense insurance offered is the same as for active employees. Attached to this letter is a brief description of the coverages provided.

Of course, if you or your spouse are 65 or older and have Medicare, the Plan will only pay towards qualified expenses either not covered or not paid in full by Medicare.

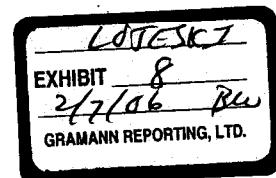
2. WHO IS ELIGIBLE TO ENROLL?

Retired employees receiving a J I Case Pension and Surviving Spouses receiving a Spouse's Pension are eligible. However, everyone age 65 or older must be enrolled for Medicare.

3. WILL A PREMIUM PAYMENT BE REQUIRED?

a) Age 65 or older

Retirees and Surviving Spouses, age 65 or older, are not required to pay a premium, either for themselves or any eligible dependent. Instead, the coverage shall be fully paid by the Company.



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RETIREES OF J I CASE COMPANY,  
RETIRER UNDER THE HOURLY EMPLOYEE PENSION PLAN  
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b) Under age 65

A monthly payment of one-half of the total premium is required if you are a Retiree or Surviving Spouse under age 65. The monthly premium payments will be deducted from your pension checks if you enroll. During 1972, the required monthly premium payments will be as follows:

Personal coverage only . . . . . \$ 9.84

Personal and Dependent coverage . . . . . \$24.77

4. HOW DO I ENROLL?

If you are a Retiree or Surviving Spouse, age 65 or older, enrollment is not necessary. Instead, you and your eligible dependents are automatically covered as of January 1, 1972. Thus, you will not find an enrollment card enclosed.

If you are a Retiree or Surviving Spouse under age 65, you must complete and return either the enclosed enrollment or waiver card.

To enroll, complete and return the green enrollment card. Please print your name, and fill in the card completely, listing all required information, and be certain you sign for the correct coverage (Personal coverage only or Personal and Dependent coverage). Keep in mind this card will authorize the premium deduction from your pension checks, so be sure to sign on the correct line.

If you do not wish to take the coverage, complete and return the orange-colored waiver card. If you do waive participation, a deduction will not, of course, be taken from your pension.

If you waive participation now, you may apply for coverage in the future, but the Metropolitan will then require a Statement of Health and possibly a medical exam. You will, however, automatically become covered when you reach age 65.

In either case, if you are under age 65 you must return either an enrollment or waiver by January 31, 1972. Please note, enrolments will not be permitted after that date. If an individual does not respond by January 31, we have no choice but to assume participation has been waived.

RETIREES OF J I CASE COMPANY,  
RETIRERD UNDER THE HOURLY EMPLOYEE PENSION PLAN  
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5. WHO ARE ELIGIBLE DEPENDENTS?

Your eligible dependents are your spouse (regardless of age) and your children under age 19.

6. HOW DO I SUBMIT A CLAIM?

A claim form is being developed by the Metropolitan and a supply will be sent to your home within the next few weeks (unless, of course, you waive participation).

Claims on yourself or your dependents, will be processed and paid directly by the Metropolitan, and are to be sent to the following address:

J. P. McWilliams  
Group Health Claims  
Metropolitan Life Ins. Co.  
330 Vanderbilt Motor Parkway  
Hauppauge, Long Island, New York 11787

If you are covered by Medicare, it is best to not submit a claim to Mr. McWilliams's office until Medicare has made its payment and issued the Report of Medicare Payments to you. A copy of this Medicare Report should be sent in with your claim. Copies of bills may be attached to the claim form for submission.

7. WILL I RECEIVE A POLICY?

A combined Policy-Booklet is being developed and will also be sent to your home in early 1972 - again with the exception of those who waive coverage.

This Policy-Booklet will not be ready by January 1; but this will not have any effect upon your coverage. If you are 65 or older, or under age 65 and enroll by January 31, you will be covered as of January 1, and qualified medical expenses incurred on or after that date will be honored.

8. WILL I RECEIVE ANYTHING FOR THE NEW PRESCRIPTION DRUG PLAN?

You will receive Identification Cards for yourself and your spouse which you are to show to the Pharmacist when purchasing a prescription. These are also being prepared by the Metropolitan and will be sent to your home.

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RETIRED UNDER THE HOURLY EMPLOYEE PENSION PLAN  
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9. WILL MY SPOUSE BE ABLE TO KEEP THIS COVERAGE IF I PASS AWAY?

If you have elected the Spouse's Optional Form of Pension and your spouse will receive a pension as a result, your spouse will be able to keep this coverage for the remainder of her lifetime. Should your spouse be under age 65 at the time, the monthly premium listed under question number 3 above, will be required to age 65. If you did not elect the Spouse's Option, however, your spouse will not be eligible to continue the coverage.

For those of you under 65 and required to complete either an enrollment or waiver card, a self-addressed envelope is enclosed for your convenience. Please keep in mind the deadline date for enrollment is January 31, 1972.

The claim forms, Policy-Booklet, and Drug Plan Identification Card mentioned above will next be sent to you as soon as possible.

Sincerely,

  
C. J. Devine, Director

Benefits & Practices

jml  
Att.

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